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THE HEALTH OF THE SCHOOL CHILD IN DORSET



ANNUAL REPORT
of the
Principal School Medical Officer
for the year
1961

A. A. LISNEY, M.A., M.D., D.P.H.

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FOREWORD

In the foreword to my report for 1960 I drew attention to the very marked and serious deterioration of children's teeth during recent years. As far as the school dental work in Dorset is concerned the establishment of dental officers has been maintained at a fairly reasonable level since 1951. In spite of this however it has been quite impossible to carry out all the necessary conservative treatment as two-thirds of the children inspected at school each year are found to have dental defects.

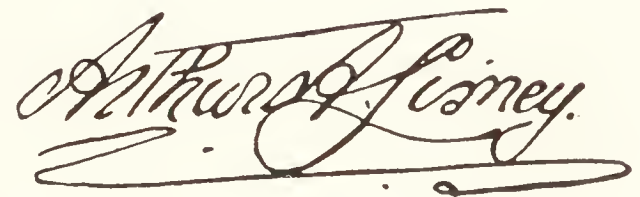
There is a general shortage of dentists and, as no improvement in this situation is likely for some years to come, the Ministries of Health and Education have jointly sponsored a scheme for the training of dental auxiliaries under the auspices of the General Dental Council.

In July 1961 the Principal Dental Officer and myself visited the training school, which had been in operation since October 1960, and we were agreeably surprised at the very high standard of training and ability of the students. The course extends over two years and it is noteworthy that in spite of the high academic qualifications required the applications for places at the beginning of the first year were far greater than the school could accommodate. Already the demand from local education authorities for auxiliaries who will complete their training in July 1962 far exceeds the supply and it is a matter of regret that this authority was not one of those who took the opportunity of appointing a dental auxiliary to assist with the urgent demand for dental treatment in the schools.

Orthodontic clinics provided by the Regional Hospital Board for children have, for a number of years, only been available in East Dorset and discussions with the Board towards the close of the year have resulted in the provision of orthodontic sessions at Dorchester to commence in 1962.

Although the basic arrangements for the medical supervision and inspection of school children have not appreciably altered for very many years it has become apparent that their improved physical condition and the elimination of many of the defects from which they used to suffer necessitated some changes in the type and frequency of medical examinations. The Ministry of Education have been encouraging local education authorities to look into this question and bring their arrangements to-to-date. During the year discussions with the school medical officers took place and some experimental work was completed with the result that certain changes will be effected during the coming year which will be fully discussed in my next report.

The school health service is administered under the direct supervision of my deputy Dr. A. F. Turner and to him, the school medical and dental officers together with the clerical staff of the section under Mr. T. R. Townsend, I am indebted for their loyal and efficient support during the year.

A handwritten signature in dark ink, reading "Arthur F. Lacey". The signature is written in a cursive style with a long, sweeping underline.

Principal School Medical Officer.

April 1962

SCHOOL HEALTH SERVICE ESTABLISHMENTS

Central Staff

<i>Principal School Medical Officer, County Medical Officer of Health,</i> LISNEY, A. A., M.A., M.D., D.P.H.	LAYLEE, MRS. E. G., L.D.S. (Part-time). LINLEY, MRS. E., L.D.S. MAYNARD, P. H. W., L.D.S. (Commenced 30.10.61). NEAME, C. S., L.D.S. ROBERTSON, K. P., L.D.S. YATES, A. V.
<i>Deputy Principal School Medical Officer Deputy County Medical Officer of Health,</i> TURNER, A. F., M.B., B.Ch., D.P.H.	<i>Educational Psychologist</i> (Education Department Staff), TAYLOR, R. J. M., M.A., B.Ed.
<i>School Medical Officer, Senior Medical Officer,</i> TOWNSEND, M., M.B., B.S., M.R.C.P., D.C.H.	<i>County Public Health Engineer,</i> KING, F. M. W., F.S.E., F.R.S.H., F.I.P.H.E., M.A.P.H.I.
<i>School Medical Officers, Assistant County Medical Officers of Health,</i> MEADOWS, J. G., M.B., Ch.B., D.P.H. (commenced 17.7.61). WHITE, J. C., M.B., B.S., M.R.C.S., L.R.C.P., D.P.H., D.C.H.	<i>Assistant County Public Health Officer,</i> PARRY, A. H., M.R.S.H., M.A.P.H.I.
<i>School Medical Officers, Senior Assistant County Medical Officers of Health, (Combined Appointments).</i> ARMIT, A., M.B., Ch.B., D.P.H. HOPKINS, G. B., M.B., Ch.B., D.P.H. LAWRENCE, I. B., B.Sc., M.B., Ch.B., D.P.H. O'KEEFFE, E. J., M.R.C.S., L.R.C.P., D.P.H. PEARSON, N. F., M.R.C.S., L.R.C.P., D.P.H.	<i>Superintendent Health Visitor,</i> RANKLIN, MISS I. F., S.R.N., S.C.M., H.V.CERT.
<i>Consultant Children's Psychiatrist, (Regional Hospital Board Appointment).</i> WHILES, W. H., M.R.C.S., L.R.C.P., D.P.M.	<i>Deputy Superintendent Health Visitor,</i> HEATHER, MISS G., S.R.N., S.C.M., H.V.CERT. (Resigned 11.4.61). FLEX, MISS J. E., S.R.N., S.C.M., H.V.CERT. (Commenced 1.8.61).
<i>Principal School Dental Officer,</i> PRETTY, P. J., L.D.S.	<i>Assistant Superintendent Health Visitor,</i> WOOD, MISS M. P., S.R.N., S.C.M., H.V.CERT.
<i>Dental Officers,</i> COULTON, K. H., L.D.S. GREENFIELD, D. G., L.D.S. (Full-time from 27.3.61). HODGES, W. V. A., M.C., L.D.S.	<i>Speech Therapists</i> (2). <i>Psychiatric Social Workers</i> (2). <i>School Nurses (Health Visitors)</i> (23). <i>Dental Attendants</i> (8). <i>Administrative Assistant,</i> TOWNSEND, T. R.

Poole Excepted Area Staff.

<i>Area School Medical Officer, Borough Medical Officer of Health,</i> HUTTON, J., M.D., D.P.H.	<i>Dental Officers,</i> BARNARD, A. C. S., L.D.S., R.C.S. GAPPER, A. E. G., L.D.S. <i>Vacancy.</i>
<i>School Medical Officers, Assistant Medical Officers of Health,</i> CAIRNS, K. M., M.B., B.S., M.R.C.S., L.R.C.P. HADDEN, W. E., M.B., B.S., D.P.H., D.A., D.T.M. & H. PARKEN, D. S., M.B., B.S., D.C.H., D.P.H. (Resigned 10.9.61). WILLIAMSON, H. C., M.B., B.Ch., D.P.H.	<i>Assistant Superintendent Health Visitor,</i> KINGSBURY, MISS M. M., S.R.N., S.C.M., H.V.CERT.
<i>Area Dental Officer,</i> TAYLOR, P. B., L.D.S. (Resigned 30.9.61). WILLIAMS, E. R., L.D.S. (as from 13.11.61).	<i>School Nurses (Health Visitors)</i> (12). <i>Speech Therapist</i> (1). <i>Dental Attendants</i> (4).

South Dorset Divisional Executive Area Staff.

<i>Area Medical Officer, (Combined Appointment).</i> WALLACE, E. J. G., M.B., Ch.B., D.P.H.	<i>Dental Officers,</i> FARWELL, E., L.D.S. LAYLEE, MRS. E. G., L.D.S. (Part-time). MASON, MRS. M. G., B.D.S. (Part-time). <i>Vacancy.</i>
<i>School Medical Officer, Assistant County Medical Officer of Health, (Combined Appointment).</i> WARD, C. A. G., M.B., B.S.	<i>School Nurses (Health Visitors)</i> (8). <i>Dental Attendants</i> (2).

POPULATION

The population of Dorset as estimated by the Registrar General at June, 1961, was—315,580.

Schools and Scholars

In January 1962 there were 252 maintained schools in the county, the types of schools being as follows:—

Type	South Dorset Area	Poole	County Area	Totals
Primary	25	24	165	214
Secondary Modern	5	6	11	22
Grammar/Modern	—	—	2	2
Grammar	1	2	11	14
Totals •	31	32	189	252

The average numbers of children on the school registers in January 1962 were:—

Area	Primary	Secondary Modern	Grammar/Modern	Grammar	Totals
County Districts	13,949	4,911	1,588	3,286	23,734
Poole Excepted Area	7,339	3,829	—	1,440	12,608
South Dorset Divisional Executive	4,632	2,090	—	963	7,685
Totals	25,920	10,830	1,588	5,689	44,027

The total of 44,027 schoolchildren may be compared with 43,824 in 1960, 42,270 in 1957 and 39,377 in 1954.

CO-ORDINATION

There were no major changes in co-ordination during the year but discussions took place between the Regional Hospital Board, representatives of the health services and the local education authority in connection with the proposed extension of the orthodontic service in the county provided by the Board; it is hoped that the improved service, which includes consultant sessions in Dorchester, will commence in 1962.

MEDICAL INSPECTION

Plans for modifying periodic medical inspection at schools on lines recommended by the Ministry of Education are well advanced for implementation in 1962. This, therefore, will be the last year when routine school medical inspections of three set age groups will take place:

- (a) As entrants at the age of five years.
- (b) During the last year at primary school at the age of ten to eleven years.
- (c) As leavers. In practice this takes place at fourteen to fifteen years of age.

It is proposed to modify this system so that children are inspected more frequently for certain types of defect, particularly vision, and children with known defects re-examined when necessary. It is also intended to make more time available for the examination of children with special problems or defects brought forward by teachers.

FINDINGS AT MEDICAL INSPECTION

Uncleanliness

Altogether 226 children were found infested with lice. There were only fourteen cases of ringworm of the body, ten cases of scabies and seventeen of impetigo. Routine inspections are no longer carried out except when required or requested by the school, but even so, a total of 68,043 individual inspections were necessary during the year.

Nutrition

Table A in the Statistical Appendix shows that only 0·26 per cent of children are suffering from any degree of malnutrition.

Nose and Throat Conditions

Children operated on for enlarged and unhealthy tonsils and adenoids numbered 763. This slight increase over the previous year may be due to the fact that a larger number of cases were referred to ear, nose and throat consultants following hearing tests at the schools. Cases of slight hearing loss are often due to defects which can be cured by operation.

Respiratory Diseases

A total of seventy-two respiratory defects were diagnosed which required treatment. This is nineteen more than the previous year and reflects the finding of early tuberculosis cases following mantoux testing of the five and thirteen year-old age groups, which are now tested routinely.

Defects of Vision

Spectacles were prescribed in 1,136 of the 2,509 cases of defective vision discovered. Co-operation with the hospital eye service is excellent and there is no waiting list or delay in the supply of spectacles.

Ear Disease and Hearing

All children 'at risk' are now screened by the health visitors at the age of seven months and doubtful cases referred to the audiometrician and subsequently to the ear, nose and throat specialist if there is any loss of hearing; further testing is also carried out on all school entrants. Twenty-seven children were supplied with hearing aids during the year and seventy-eight are now using aids in class.

Dental Defects

Of the 32,620 pupils inspected 20,050 were found to require treatment. The incidence of caries shows no signs of decreasing, no doubt due to the fact that no effective steps have as yet been taken to limit indiscriminate eating between meals at school.

INFECTIOUS DISEASE

Again there were no cases of poliomyelitis or diphtheria notified. The incidence of whooping cough, 238 cases, showed a slight increase over that of the previous year and there were no deaths.

POLIOMYELITIS VACCINATION

Vaccination of school children against poliomyelitis was mainly confined to the fourth booster dose for children between the ages of five and eleven years, most of the primary vaccinations having been completed in 1960.

Statistics

The following table shows the number of persons who were vaccinated against poliomyelitis during 1961:

Class	Received two injections				Received third injection			
	County Area	Poole Area	S. Dorset Area	Totals	County Area	Poole Area	S. Dorset Area	Totals
Children and young persons born in years 1943-1961	2,976	2,041	995	6,012	9,804	2,691	5,715	18,210
Persons born in years 1933-1942	834	456	269	1,559				
Persons born before 1933 who have not reached their 40th birthday	2,088	1,246	382	3,716	Received fourth injection			
Others	45	62	78	185	11,809	5,553	5,731	23,093
Totals ..	5,943	3,805	1,724	11,472				

DIPHTHERIA IMMUNISATION

As a result of improved and additional clinics throughout the county additional routine sessions for immunisation are being held after school hours and more pupils are taking advantage of this service which saves school time and a certain amount of classroom disturbance.

Statistics

Children who had completed a course of diphtheria immunisation at any time before the 31st December 1961

Area	Children under 5					Total	Children 5—14		Totals
	Under 1	1	2	3	4		5—9	10—14	
County	502	1,918	1,962	1,735	1,521	7,638	8,547	12,024	20,571
Poole	444	929	960	918	856	4,107	4,696	6,649	11,345
Weymouth and Portland	262	653	678	608	579	2,780	2,763	4,581	7,344
Totals ..	1,208	3,500	3,600	3,261	2,956	14,525	16,006	23,254	39,260

B.C.G. VACCINATION

The B.C.G. vaccination scheme of children reaching the age of thirteen has continued. All private and public schools are included in the scheme.

The acceptance rate was 81·9 per cent and of the 3,410 children tested 365 were mantoux positive (10·7 per cent). It is interesting to note that 14·5 per cent of the children tested in Poole were positive as compared with 9·2 per cent in the rest of the county.

Arrangements are made for all positive children to be followed up by chest X-ray.

Statistics

Summary relating to B.C.G. Vaccination over a period of five years

	1957	1958	1959	1960	1961
Number of schools visited ..	86	56	68	53	46
Number of children eligible ..	6,582	2,266	5,942	4,579	4,546
Number of parental consents ..	4,621 (70·2%)	1,753 (77·3%)	4,333 (81·3%)	3,789 (82·7%)	3,726 (81·9%)
Number of children mantoux tested ..	4,260	1,601	4,174	3,689	3,410
Positive reactors	687 (16·1%)	237 (14·8%)	455 (10·9%)	401 (10·8%)	365 (10·7%)
Negative reactors vaccinated ..	3,441	1,347	3,673	3,194	2,935
Absentees	132	141	159	225	316

FOLLOWING-UP

Parents of children examined at school medical inspections are informed of defects found and of the need for treatment where necessary. Most parents co-operate well but where they do not the health visitors, in their capacity as school nurses, pay follow-up visits in order to persuade the parents to obtain the required treatment.

Where such a visit still does not produce the necessary result and the defect, if untreated, could have a detrimental effect upon the health of the child, then the inspector of the National Society for the Prevention of Cruelty to Children is informed and asked to visit the family. This seldom fails to have the desired effect.

The number of visits made by school nurses to the homes of schoolchildren during 1961 was 980.

MEDICAL TREATMENT

The arrangements which have been in existence for some years between hospitals, general practitioners and the school health service continue to work well. In particular the close association between the health department and the paediatricians has been most advantageous.

MINOR AILMENTS

The following table relates to the Poole and South Dorset areas only as it has not been found necessary to hold such clinics elsewhere.

Statistics

Number of cases treated at minor ailment clinics

<i>Year</i>	<i>Poole</i>	<i>South Dorset</i>	<i>Totals</i>
1957	854	715	1,569
1958	376	352	728
1959	283	243	526
1960	541	171	712
1961	605	115	720

Vision

Vision is tested at routine medical inspection and a special sight examination is carried out on every child at the age of eight years. The parents are informed if a defect is found and given the choice of having their child examined either by a consultant ophthalmologist through the school ophthalmic service or of making their own arrangements. Most parents choose the former course.

Colour vision is tested at the routine intermediate medical inspection.

Ophthalmic Treatment

An excellent school ophthalmic service is provided by the two hospital management committees in the county and a report on every child seen is submitted to the principal school medical officer.

Provision of Spectacles

Spectacles were prescribed through the school ophthalmic service for 1,136 children. There is no delay either in the provision of spectacles or in the arrangements for repair or replacement.

External and Other Eye Disease

The number of cases of external and other eye diseases treated during 1961 was thirty compared with eighty-two in 1960.

Orthopaedic Treatment

Minor orthopaedic defects are treated in special classes at the schools; more serious cases are referred to the orthopaedic specialists.

DENTAL INSPECTION AND TREATMENT

The principal school dental officer reports on the work of the dental officers in the county as follows:—

‘The total number of dental officers employed remains at fourteen, which is one below the approved establishment. Although the proportion to the school population is higher than that in many other authorities, it is only possible to carry out routine inspection and treatment on an average of once a year.

Dental Auxiliaries

‘It is well known that there is a general shortage of dental surgeons in the country, but it is not possible to increase the number until the existing dental schools are enlarged or new ones built. It will therefore be some years before any appreciable increase will become apparent, as training covers a five-year period. In order to assist in overcoming this shortage at an earlier date, a scheme was started in October 1960 for the training of ancillary dental workers who are to be known as dental auxiliaries.

‘The training of these girls takes two years and there is an annual intake of sixty, the first to qualify will therefore be available towards the end of 1962.

‘Criticisms have been made that dental auxiliaries are only partly trained, but in actual fact they are fully trained in their own field of dentistry which covers simple fillings, extraction of temporary teeth, scaling and polishing, instruction in oral hygiene and dental health education. I was able to visit the training school in London during July when I was very favourably impressed by the high standard of the work after they had had, at that time, less than one year’s training.

‘When the first batch of students qualify they will be few compared with the number of local authorities in the country, but as more become available each year their employment will be a means of rendering valuable assistance to the school dental service.

Orthodontic Service

‘For some years it has been necessary for patients requiring specialist orthodontic treatment to travel to Boscombe Hospital to be seen by the consultant orthodontist. This journey which, in many cases has to be made at frequent intervals, is inconvenient to some parents and impossible for others, consequently the treatment is not carried out for many children who require it. It is not possible for patients living in the extreme western end of the county to make the return journey in one day by public transport and it has, therefore, been necessary to convey these patients by hospital car service.

‘It has now been decided by the Regional Hospital Board that the consultant orthodontist will visit the Dorchester Clinic one day each week commencing early in the new year to see cases referred to him by general dental practitioners and school dental officers. This will save the patients and their parents many hours of travelling time and will enable more cases to take advantage of this specialist service. It is anticipated that eventually it will be necessary to increase the number of sessions to more than one day a week.

Prevention of Caries

‘There are no signs of improvement in the dental health of the nation and the habit of eating starchy and sweet foods between meals is undoubtedly a contributory factor to the present unsatisfactory state of the teeth of school children. This habit could be more easily broken if the main meals contained a higher proportion of protein, which would not only be more sustaining, but would reduce the desire for snacks.’

REMEDIAL PHYSICAL EDUCATION

The following report has been received from the county education officer in connection with remedial physical education:—

‘Remedial work in primary schools has continued at more or less the same level as in 1960, with one full-time visiting teacher and three part-time teachers, although the numbers of children recommended to receive remedial exercises seem to be decreasing gradually. These visiting teachers continue to receive the invaluable assistance of teachers in the schools, although it is often difficult to release them for the purpose because of pressure on staffing as a result of the Ministry’s quota scheme.

‘The number of children receiving remedial exercises in secondary schools also remains more or less the same as in 1960, classes now being held in nineteen schools.’

SPEECH THERAPY

Three full-time speech therapists are employed. One works whole-time in Poole while the other two, one of whom is the senior speech therapist, cover the remainder of the county.

Accommodation in the new clinics is excellent and the therapists and children alike are encouraged to do their best by these convenient and pleasant surroundings.

During the year 677 children were dealt with. Of these 240 were in Poole and 64 and 373 in South Dorset and the county area respectively. The opening of the deaf assessment clinics at Poole and Weymouth have been of considerable value and the speech therapists attend these clinics when they have cases presenting difficulties in diagnosis or complicated by hearing loss in addition to speech defects.

Statistics

Analysis of the cases dealt with during 1961

<i>Cases treated</i>	<i>Discharged</i>	<i>Under treatment</i>	<i>Cases tested</i>	<i>In need of treatment</i>	<i>Not in need</i>	<i>School visits</i>	<i>House visits</i>
454	238	216	223	163	60	56	28

OPEN-AIR EDUCATION

There are no open-air schools in the county. Only a very small number of children are so delicate as to require this type of treatment and it is much more economical to send them to schools already established in other areas than to make this type of provision locally.

CO-OPERATION OF PARENTS

Parents continue to take an active interest in the school health service and attend at school when their children are medically examined. The parent teachers association meetings are also well attended when talks on health subjects are given.

CO-OPERATION OF TEACHERS

The school health service receives excellent support from the teachers. They assist in many aspects of school health work and the considerable success of the scheme for the vaccination of school children against poliomyelitis is due in very great measure to the help given by them.

CO-OPERATION OF SCHOOL WELFARE OFFICERS

Close co-operation is maintained, through the education department, with school welfare officers.

CO-OPERATION WITH GENERAL PRACTITIONERS

Family doctors are notified of all defects found at medical inspections and where it is considered that a specialist opinion is required they are informed that, unless they wish otherwise, arrangements will be made direct by the school health service; most doctors prefer this method. General practitioners are making increasing use of the child guidance, speech therapy and other specialised services provided by the local education authority.

CO-OPERATION WITH VOLUNTARY BODIES

There is excellent co-operation with all voluntary bodies concerned with the care of children. The services of the inspector of the National Society for the Prevention of Cruelty to Children are especially helpful in cases, fortunately now very few in number, where the lack of adequate home care results in a child being sent to school in a neglected condition.

PROVISION OF MILK AND MEALS

Provision of Milk

At the end of the year ninety-seven per cent of the schools in the county were receiving pasteurised milk under the milk in schools scheme and it is satisfactory to be able to report that all schools were being supplied with bottled milk. The number of pupils attending schools in Dorset at 31st December 1961 was 49,278 of which 37,638 (seventy-six per cent) were taking school milk. The position at the end of the year was as follows:—

Number of maintained schools receiving pasteurised milk	..	..	..	243
Number of non-maintained schools receiving pasteurised milk	..	..	..	71
Number of maintained schools receiving raw tuberculin tested milk	..	..	..	7
Number of non-maintained schools receiving raw tuberculin tested milk	..	..	..	2
				<hr/> 323 <hr/>

Close supervision has been maintained of the supply of milk under the milk in schools scheme and officers of the county health department submitted 1,569 samples for laboratory examination.

Analysis of samples submitted for laboratory examination

<i>Pasteurised</i>				<i>Tuberculin-tested</i>		<i>Total number of samples</i>	<i>Number of schools sampled</i>
<i>Methylene blue test</i>		<i>Phosphatase test</i>		<i>Methylene blue test</i>			
<i>Pass</i>	<i>Fail</i>	<i>Pass</i>	<i>Fail</i>	<i>Pass</i>	<i>Fail</i>		
*1,174	99	1,494	8	59	8	1,569	†284

*229 samples of pasteurised milk were not submitted to the methylene blue test as the atmospheric shade temperature exceeded the prescribed 70°F on the days the samples were taken.

† Sampling of school milk at the thirty-nine schools in the Borough of Poole was undertaken by the borough public health inspectors.

It will be seen from the table that eight specimens of raw tuberculin tested milk (twelve per cent) out of a total of sixty-seven submitted for examination failed the methylene blue test. Whilst the percentage of failures in respect of this grade of milk is higher than might be expected it is noteworthy that it is considerably less than for 1960. The number of pasteurised milk samples which failed this test was 99 (7·8 per cent), a high proportion involving one supplier, and appropriate action was taken by the county health department.

Very few complaints were received during the year in regard to school milk and it is evident that the suppliers are taking precautions to ensure that fresh milk is delivered in clean, sound bottles. Not infrequently dairymen experience difficulty in cleansing school milk bottles, due to the presence of milk residues, used drinking straws and bottle caps. It would be a great help if used straws and bottle caps were removed and the bottles rinsed in clean water before returning them to the dairy. On many occasions suppliers have complained of the very unsatisfactory condition in which bottles are returned from some schools.

To check the cleanliness of washed bottles, rinses were obtained at the premises of many of the suppliers and of 369 specimens examined 21 (5·7 per cent) failed to reach a satisfactory standard.

In connection with the supply of raw milk to schools three samples were submitted for biological examination for tubercle bacilli and each specimen was negative to the test.

In addition to the taking of school milk samples for the prescribed laboratory tests seventy specimens were checked for compositional quality and in each case the milk was found to be of a satisfactory standard.

Provision of Meals

The following information relating to the provision of meals to schools in the county has been supplied by the county education officer:—

Number of schools or departments receiving meals at 1st January 1961	..	..	256
Number of schools or departments <i>not</i> receiving meals at 1st January 1961	..	..	5
Number of schools or departments receiving meals at 31st December 1961	..	..	258
Number of schools or departments <i>not</i> receiving meals at 31st December 1961	..	..	5
Number of new kitchens opened in 1961	..	..	3
Number of new dining centres (not classroom dining) opened in 1961	..	..	1
Number of schools provided with washing-up facilities in 1961 (completely new facilities)	..	..	Nil
Daily average number of meals served in 1961	..	..	24,409
Percentage of school population	..	..	59·55%

Close supervision has been maintained of the school kitchens in connection with the food hygiene regulations and during the year 122 visits were made to these premises. It is satisfactory to be able to report that in general a high standard of hygiene has been maintained.

Food Poisoning

Outbreaks of suspected food poisoning were investigated at two schools in the county but there was nothing to indicate that the sickness might have been attributable to the consumption of a school meal.

Outbreak of Dysentery

Early in March a number of cases of sickness and diarrhoea occurred amongst children attending an infant school in Dorchester; two members of the teaching staff were also involved. An investigation was made and two positive cases of sonne dysentery were identified.

SCHOOL SWIMMING

The construction of a learners' pool was completed at one school in time for it to be brought into use during the summer term and at the end of the year there were nine schools in the county with this type of pool. In addition, one prefabricated pool was installed at a school in Poole and one small portable pool provided at a rural school in the county.

These valuable aids to swimming instruction are proving most popular and full use was made of them during the summer term when the total attendance for the ten pools in the county area was over 33,000.

The construction of further learners' pools is being undertaken and it is expected that three will be ready for use in 1962.

Except at two schools where there is a system of recirculation, filtration and chlorination, the water in the learners' pools is treated by hand dosage with a hypochlorite solution. An experimental recirculation, filtration and chlorination plant is to be installed at one school and if this proves successful the possibility is that this method of treating the water will be adopted for all learners' pools where hand dosage is now undertaken.

A close check is maintained on the efficiency of the hand dosage method of chlorination and samples of swimming pool water are regularly submitted by technical assistants of the county health department for bacteriological examination. These officers also carry out spot tests for chlorine residual.

In addition to the learners' pools swimming instruction for schoolchildren is carried out at five public baths, two public school baths and a cooling water reservoir at a large creamery; the latter arrangement by courtesy of the management. A total of 180 samples of water were submitted for laboratory examination of which 154 produced a satisfactory report. The necessary investigatory work was undertaken in the case of the 26 unsatisfactory samples, eight of which were in respect of two public swimming baths.

WATER SUPPLIES TO SCHOOLS

During the year two schools were connected to a main supply of water so that at the 31st December the number of educational establishments in the county not connected to a public main was sixteen. At five of these premises automatic chlorinators have been installed and supplies of drinking water at a further seven schools are obtained by hand dosage, using an approved hypochlorite solution. No water treatment is carried out at two schools and in the remaining two instances supplies of drinking water are conveyed to the schools daily.

Regular sampling of the treated water is undertaken and in addition frequent spot tests are made for efficient chlorination. During the year 220 samples were submitted for bacteriological examination of which twenty proved to be unsatisfactory. In the case of the unsatisfactory samples, investigations were made and subsequent samples proved to be satisfactory.

SCHOOL CAMPS

Visits of inspection were made to the camps at Carey and Blashenwell during the camping season and in each case a satisfactory standard of hygiene was maintained.

HEALTH EDUCATION

Health education continues to be given by the school medical officers and school nurses but the programme was curtailed during the year owing to pressure of work in other directions.

Statistics

Number of talks and/or film shows given during the year

Subject	Talks and/or Filmshows		Total Attendances
	Number	per cent	
Child Care	90	37.5	1,235
Home Safety	15	6.25	500
First Aid	57	23.75	988
Teeth, Care of	12	5.00	356
Vaccination and Immunisation	24	10.00	479
Mental Health	3	1.25	121
Personal Hygiene	16	6.66	258
Food Hygiene	9	3.75	190
Health Visiting	1	0.42	16
Home Nursing	13	5.42	175
Totals	240	100.00	4,318

PHYSICAL EDUCATION

The County Physical Education Adviser reports as follows:—

Courses for Teachers

‘During the year a number of training courses dealing with varied aspects of Physical Education have taken place.

‘Dorset was very fortunate in having visits from two national coaches. Mr. A. D. Kinnear, National Swimming Coach, Amateur Swimming Association, conducted a one-day course designed to help teachers who give swimming instruction in outdoor pools. Demonstrations with classes of children were given on the learners' pools at Dorchester Modern School and Dorchester Primary School. Mr. Kinnear provided not only great help to teachers concerned with teaching swimming for the first time, but inspiration to the more experienced teachers.

‘Mr. G. H. G. Dyson, A.A.A. Chief National Coach, included in a tour of the South West of England a coaching session with secondary school masters and senior boy athletes. The session, mainly devoted to pole vaulting, was held at Dorchester Modern School where there are excellent facilities for field events.

‘Movement education courses were held at Poole and Weymouth for teachers in primary schools and as a “follow-up” one-day visits were arranged to enable work to be seen in primary schools in Portsmouth and Hampshire. Women teachers in secondary schools attended a two-day course in movement education at the Bournemouth School for Girls.

‘One-day coaching courses were arranged—at Blandford for women teachers in secondary schools on the coaching and umpiring of hockey and at Dorchester for primary and secondary school teachers on the interpretation of the 1961 netball rules. Sessional training courses in folk dancing were conducted at Bridport, Ferndown, Weymouth and Poole.

‘The physical education advisers are appreciative of the co-operation, support and enthusiasm that Dorset teachers in primary and secondary schools have contributed to the courses that have been arranged. Attendances have been extremely good.

Young Footballers' Residential Course

'The fifth annual young footballers' residential course for youths of fourteen to seventeen years was accommodated at Carey Camp. The practical work took place at Wareham Modern School and was staffed by Dorset schoolmasters who are qualified coaches. Sir Stanley Rous, Secretary of the Football Association, visited this course.

Folk Dance Festivals

'Festivals took place at Bovington, Bridport, Bradford Abbas, Corfe Castle, Ferndown and Poole.

Rallies

'The Dorset County Netball Association held two rallies, one at Blandford for primary schools; the other at Bovington for secondary schools.

'The Dorset Women's County Hockey Association arranged a tournament for affiliated schools at Sherborne School for Girls.

Sports Association

'The many school sports associations continue valuable work at inter-school, district and county levels. At a meeting of fifty-five teachers in Dorchester a Dorset Schools' Swimming Association was formed.

'The aims are to encourage swimming, life-saving and diving, to stimulate public opinion in favour of more swimming pools and, if possible, to arrange county championships.

Learners' Swimming Pools

'There are eight learners' pools in use in secondary schools and several under construction. Work on the first learners' pool in a primary school in the County area commenced on 1st April at Dorchester Primary School. Directed by a committee of four, a team of about seventy fathers, some of them building workers, constructed the pool in seven weeks and 350 children began using the pool on 30th May. Early in June eight children could swim one width (20 ft.) and on 25th July the number had risen to 120. It is interesting to note that so many children learned to swim in one season and forty-nine were awarded the County Beginners' Certificate; the figures prove the value of these pools and given the opportunity young children progress very rapidly when confidence has been established. It is hoped that in future there will be more such pools as every child should be given the opportunity to learn to swim.

'A prefabricated pool was installed at Branksome Heath Primary School, Poole and a garden pool at Caundle Stourton School.

Swimming Instruction

'Sea swimming continues at Charmouth, Lyme Regis and Weymouth. The town baths are used at Blandford, Gillingham, Shaftesbury, Poole and Ringwood. This year schools were unable to use the corporation bath at Yeovil as it was closed for reconstruction.

'For the use of their pool, appreciation is expressed to Mr. E. V. Wing of Motcombe, Sherborne School for Girls, Sherborne School and United Dairies, Sturminster Marshall.

County Swimming Awards

'The number of certificates at four levels of proficiency has increased as more learners' pools came into use and 1,552 certificates were awarded in the county area. Of this total 798 were gained by children using learners' pools.

Camps

'The County School Camps at Carey and Blashenwell had a most successful season, 1,552 campers attending. Mr. Bateman, Camp Warden for five years, has resigned in order to resume normal teaching duties.

Staffing

'The continuing scarcity of women physical education specialists and semi-specialist teachers makes it difficult to fill the vacancies arising in the secondary schools.

Playing Fields

'It is encouraging that the provision of playing fields progresses. Many of the primary schools now have well maintained pitches.

Halls and Gymnasias

'A few primary schools are being provided with halls as part of their modernisation and extensions. It is hoped that one or two halls can be equipped with gymnastic equipment each year.

'At Parkstone Grammar School, Poole, the gymnasium has been completed and equipped. Fixed and portable equipment has been provided in the hall at Lytchett Minster Modern School.

Physical Education Apparatus

'Primary schools continue to be provided with climbing frames, storage sheds and record players.'

HANDICAPPED CHILDREN

The table concerned shows little overall change as compared with previous years. Owing to the development of hearing assessment facilities there is an increase in the number of deaf and partially deaf children, fourteen new cases having been diagnosed during the year. The comparable figures were five in 1960, three in 1959 and one each year in 1958 and 1957. It is interesting to note however that the total numbers admitted to special residential schools for the deaf and partially deaf have fallen from twenty-seven in 1953 to twenty-one in 1961. This is due to the fact that more children are being retained in the normal schools and receiving special teaching from the peripatetic teachers of the deaf.

Attention is also drawn to the number of children with other handicaps who are educated in normal schools, including three epileptics, twenty-four physically handicapped and sixteen delicate children. Mention should be made of the interest and care taken of these children while at school by teachers and fellow pupils, who help to make it possible for them to enjoy a relatively normal life.

The number of children referred to the local health authority as unsuitable for education has fallen as a result of the changes under the Mental Health Act and corresponding changes in Section 57 of the 1944 Education Act. This has resulted in the informal attendance of children at educationally sub-normal classes and in training centres and is a great improvement over the previous rather rigid legislation.

Handicapped Pupils, 1961

		(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	
		<i>Blind</i>	<i>Partially Sighted</i>	<i>Deaf</i>	<i>Partially Deaf</i>	<i>Educationally Sub-normal</i>	<i>Epileptic</i>	<i>Maladjusted</i>	<i>Physically Handicapped</i>	<i>Speech Defect</i>	<i>Delicate</i>	<i>Totals</i>
1. Number of pupils ascertained as handicapped pupils for the first time during 1961		1	—	—	14	178	—	13	21	3	12	242
2. Number of handicapped pupils re-examined during 1961 and retaining the same category		—	—	—	—	46	—	—	4	—	1	51
3. Number of handicapped pupils re-examined during 1961 and regraded into these categories		—	—	—	—	1	—	—	3	—	—	4
4. Number of pupils assessed during 1961 as requiring special education in Special Schools or boarding homes	B	—	—	—	—	21	—	6	6	—	5	38
	G	2	—	—	1	9	—	8	3	—	4	27
5. (i) Pupils attending Residential Special Schools and Hostels	B	3	4	6	6	44	2	15	11	1	7	99
	G	3	3	7	2	15	1	9	9	—	7	56
(ii) Pupils attending Day Special Schools or Classes	B	—	—	—	5	174	—	1	9	—	—	189
	G	—	—	—	5	115	—	—	8	—	—	128
(iii) Children receiving education at home (Section 56 cases)	B	—	—	—	—	2	—	3	9	—	—	14
	G	—	—	—	—	1	—	—	4	—	—	5
(iv) Pupils recommended to receive special educational treatment in the ordinary school	B	—	—	—	9	231	1	3	15	—	9	268
	G	—	1	—	7	124	2	4	9	—	7	154
(v) Total number of handicapped pupils in Residential Special Schools, Day Special Schools, Special Classes, Hostels and Ordinary Schools	B	3	4	6	20	450	3	21	39	1	16	563
	G	3	4	7	14	254	3	13	28	—	14	340
		6	8	13	34	704	6	34	67	1	30	903
6. Number of pupils requiring places in:— (i) Residential Schools	B	1	—	—	—	13	—	9	2	1	3	29
	G	3	—	—	—	4	—	3	3	—	2	15
(ii) Day Special Schools	B	—	—	—	—	25	—	—	—	—	—	25
	G	—	—	—	—	20	—	—	—	—	—	20
(iii) Special Classes	B	—	—	—	—	31	—	—	—	—	—	31
	G	—	—	—	—	20	—	—	1	—	—	21
7. Pupils not attending any School on the recommendation of the Principal School Medical Officer	B	2	—	—	—	3	—	1	9	—	2	17
	G	—	—	—	—	3	—	—	7	—	1	11
8. Pupils whose parents refuse to give consent for admission to Special Schools or Classes	B	—	—	—	—	12	—	6	—	—	—	18
	G	—	—	—	—	14	—	8	—	—	1	23

9. Number of children reported to the Local Health Authority during the year:—

Under Section 57 (4) of the Education Act, 1944 12

10. Number of non-county area children attending the following:—

	<i>Clyffe House Special School</i>	<i>Penwithen Hostel</i>	<i>Wimborne Day Special School</i>
Other Education Authorities ..	5	6	—
Poole Borough	4	2	23

CHILD GUIDANCE

During the year the Wessex Regional Hospital Board have increased the sessions of the consultant psychiatrist available to the county council from five to nine. This has made it possible to provide a weekly session at Weymouth instead of fortnightly and to develop regular diagnostic and treatment sessions at Bridport and in the north of the county. In order to save travelling time a whole day is spent in Bridport once a fortnight. The other weekly sessions are held in the north of the county at Sherborne and Gillingham. An adequate diagnostic and treatment service for the whole of the county is therefore now provided without patients having to travel such long distances.

Altogether 253 new cases have been seen during 1961 at the various child guidance clinics which is forty-seven more than last year. A total of 754 children have been seen by the clinic team, an increase of eighty on the previous year. At the end of the year there were 556 open cases and of these fifty were receiving intensive psychotherapy from the consultant psychiatrist and their parents helped by the psychiatric social workers. The remainder are on more superficial supporting treatment or are under periodic observation or review by one or other of the child guidance team.

There has been little change in the sources of referral compared with previous years. The greatest number came from general practitioners, followed by those referred by school medical officers. There has been a big change in the problems for which children have been referred. This year forty-two per cent were seen for nervous symptoms of varying kinds compared with twenty per cent last year, with a corresponding decrease in the number of children referred for various behaviour problems. When nervous symptoms are combined with enuresis and psychosomatic symptoms they form sixty-one per cent of the total referrals. Behaviour problems include twenty-eight children referred by the Juvenile Courts for psychiatric reports, five of whom were recommended as being suitable for approved schools, the remainder requiring other forms of treatment. Investigation of the new cases showed that fifty-six per cent needed some form of active treatment at the child guidance clinic and forty-eight of these needed intensive psychotherapy from the consulting psychiatrist, twenty were on the treatment waiting list on the 31st December, the remaining twenty-eight having commenced their psychotherapy during the year.

All members of the child guidance team keep in close touch with Penwithen Hostel for maladjusted children and the psychiatric social workers visit the parents of these children regularly. The consultant psychiatrist visits the hostel every fortnight to discuss the children with the staff and children from the hostel are seen at the Dorchester Child Guidance Clinic, some of them receiving regular psychotherapy. Case conferences are held between the child guidance team and the Penwithen Hostel staff every month.

All other children who are residentially placed as maladjusted pupils in other schools or hostels are seen by the consultant psychiatrist during holidays and the psychiatric social workers keep in close touch with their families. Each term a conference is held between the child guidance team, school medical officer and the education department to discuss the future of these children and to plan for after-care when they are due to leave their residential placement.

The consultant psychiatrist and educational psychologist attend the deaf assessment clinics in Weymouth and Poole. A number of children are found at these clinics to have associated emotional and psychological problems which need further investigation or treatment. Most of the children admitted to the Gloucester Road reception centre are seen by the consultant psychiatrist and educational psychologist and a monthly case conference is held with the children's department.

Statistics

Total number of children seen during the year 1961 ..	754
Children carried forward from 1960	501
New cases seen during 1961	253
Children awaiting investigation on 31.12.61 ..	10
Total children awaiting first psychiatric appointment on 31.12.61	30
Cases closed during 1961	198
Total number of cases under observation or treatment on 31.12.61	556

<i>Age Groups</i>				
Pre-school age .. .. .	..	..	..	13
Infant school age .. .. .	..	..	..	32
Junior school age .. .. .	..	..	..	103
Secondary school age (Modern) .. .. .	..	..	..	81
(Grammar) .. .. .	..	..	..	16
Left school .. .. .	..	..	..	8

Analysis of new cases investigated during 1961

<i>New cases referred by</i>				
School Medical Officers .. .. .	..	..	..	44
General Practitioners .. .. .	..	..	..	87
Education Officer and Head Teachers .. .. .	..	..	..	43
Children's Officer .. .. .	..	..	..	38
Probation Officer .. .. .	..	..	..	9
Other Sources .. .. .	..	..	..	32

Problems for which children were referred:

Behaviour problems .. .. .	..	..	..	44
Nervous symptoms .. .. .	..	..	..	107
Educational problems .. .. .	..	..	..	35
Psychosomatic symptoms .. .. .	..	..	..	22
Enuresis .. .. .	..	..	..	27
Special advice .. .. .	..	..	..	18

Recommendations made of new cases

Still under investigation .. .. .	..	..	..	44
Diagnosis and advice only .. .. .	..	..	..	49
Superficial treatment advised .. .. .	..	..	..	94
Intensive treatment advised .. .. .	..	..	..	48
Residential treatment advised .. .. .	..	..	..	18

Analysis of all cases closed during 1961

Diagnosis and advice only .. .. .	..	..	..	71
Transferred to other agencies .. .. .	..	..	..	12
Removed from area .. .. .	..	..	..	22
Satisfactory adjustment after C.G. treatment .. .. .	..	..	..	49
Improved after C.G. treatment .. .. .	..	..	..	18
Unco-operative or unsatisfactory response .. .. .	..	..	..	24
Deceased .. .. .	..	..	..	2

<i>Psychiatric Interviews</i>						<i>Psychiatric Social Workers</i>					
Diagnostic	..	..	..	..	212	Number of home visits by Psychiatric Social Workers					478
Re-examination		..	..	..	477	Number of clinic interviews by Psychiatric Social Workers	..	..	..	..	918
Treatment	..	..	..	..	965	Number of interviews with other officials	..	..	..	..	110
Total interviews with children	..		..	..	1,654	Visits to schools	..	..	..	..	38
Total interviews with parents and others	..		..	..	319						
Total interviews by Psychiatrist	..		..	..	1,973	<i>Educational Psychologist</i>					
						Number of clinics by Educational Psychologist	..				162
						Number of children interviewed by Educational Psychologist	..	..	..	..	214

JUVENILE DELIQUENCY

Special reports on children who attend juvenile courts are provided for the information of the magistrates. These give details of physical and mental defects found at school medical inspections and information regarding important medical and family history; there were 175 such reports during 1961. In cases where the child had attended a child guidance clinic, or where the magistrate requires a psychiatric report, this is provided by the consultant children’s psychiatrist.

EMPLOYMENT OF CHILDREN AND YOUNG PERSONS

A special report on every child nearing school leaving age is forwarded to the youth employment officer and over 3,000 such reports were furnished during the year. These have been found especially useful in placing handicapped children in suitable employment.

The bye-laws relating to the employment of children are primarily concerned with the prohibition of certain categories of employment and the regulation of the hours of work in approved occupations. A certificate is issued by the school medical officer in respect of each child concerned to the effect that such employment will not be prejudicial to his health or physical development and will not make him unfit to obtain proper benefit from his education.

SCHOOL HYGIENE

Improvements to the sanitation were made at twelve schools in the county during the year, including the provision of water closets in six instances and the connection of three school premises to the public sewer. A public main supply of water was provided at two schools.

During the past ten years a very considerable amount of improvement works has been undertaken and it is satisfactory to be able to report that the sanitary condition in the majority of the schools in the county is now satisfactory.

Clinics—Location of School Clinics and Type and Number of Sessions per Week

The Clinic, Hogshill Street, Beaminster	1 1 1	Speech Orthopaedic (Remedial) Lip Reading	Sylvan School, Livingston Road, Parkstone	1 1	Minor Ailments Hearing Assessment (per month)
County Modern School, Blandford	2	Lip Reading	The Clinic, 67, Market Street, Poole	1	Minor Ailments
Boys' School, Blandford	*11	Dental	3 Bristowes Chambers, High Street, Poole	7	Dental
Infants' School, Blandford	2	Lip Reading	Burlea Towers, 55, Parkstone Road, Poole	6 1 2 4	Speech Cleansing Asthma Child Guidance
Red Cross Hall, Whitecliff Mill Street, Blandford	1	Speech	Oakdale Clinic, 337, Wimborne Road, Poole	1 1	Minor Ailments Enuresis (per fortnight)
Alfred Colfox School, Bridport	2	Lip Reading	County Clinic, Fortuneswell, Portland	1 4 1	Minor Ailments Dental Speech
Health Centre, North Allington, Bridport	*11 1 2	Dental Speech Child Guidance (per fortnight)	Easton Methodist Schoolroom, Portland	1	Minor Ailments
Reynolds Institute, Broadway	1	Minor Ailments	St. George's School, Easton, Portland	1	Lip Reading
Primary School, Cattistock	1	Lip Reading	County Clinic, Secondary Modern School, Shaftesbury	*11 1	Dental Speech
County Clinic, Glyde Path Road, Dorchester	11 2 2 3	Dental Speech Child Guidance Lip Reading	County Clinic, Horsecastles, Sherborne	*11 1 1	Dental Speech Child Guidance (per fortnight)
County Modern School, Dorchester	2	Lip Reading	County Clinic, Bridge Street, Sturminster Newton	1	Lip Reading
Primary School, Ferndown	2	Lip Reading	Health Centre, High Street, Swanage	*11 1	Dental Speech
Gillingham School, Gillingham	1	Lip Reading	Clyffe House Special School, Tincleton	1 2	Speech Lip Reading
County Clinic, St. Martin's, Gillingham	*11 1 1	Dental Speech Child Guidance (per fortnight)	County Modern School, Wareham	1 1	Speech Lip Reading
The Clinic, Lanark Close, Hamworthy	2 4	Minor Ailments Dental	Health Centre, Westham Road, Weymouth	6 14 2 1	Minor Ailments Dental Speech Child Guidance
Primary School, Langton Matravers	1	Lip Reading	Infants' School, Wyke Regis, Weymouth	1	Speech
Woodmead Hall, Lyme Regis	2 1	Orthopaedic (Remedial) Speech	Women's Institute, Wyke Regis, Weymouth	1	Minor Ailments
Branksome Clinic, Layton Road, Parkstone	1 22	Minor Ailments Dental	County Modern School, Wimborne	1	Lip Reading
Kemp Welch School, Herbert Avenue, Parkstone	1	Minor Ailments	Grammar School, Wimborne	1	Speech
Spastic Centre, Langside Avenue, Parkstone	1	Speech	Primary School, Wimborne	1	Lip Reading

* Denotes number of sessions when school dental officers are working at these clinics.

STATISTICAL APPENDIX

Year ended 31st December, 1961

PART I

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A—Periodic Medical Inspections

P = Poole Area. S.D. = South Dorset Area. C = Remainder of County.

Age Groups Inspected (By year of birth) (1)	No. of Pupils Inspected				Physical Condition of Pupils Inspected																			
					Satisfactory					Unsatisfactory														
	No.					No.					% of Col. 2													
	(2)					(3)					(4)					(5)					(6)			
P.	S.D.	C.	Totals	P.	S.D.	C.	Totals	P.	S.D.	C.	Totals	P.	S.D.	C.	Totals	P.	S.D.	C.	Totals					
1957 and later ..	5	—	2	7	5	—	2	7	100·0	—	100·0	100·0	—	—	—	—	—	—	—					
1956 ..	483	393	638	1,514	478	393	638	1,509	98·96	100·0	100·0	99·67	5	—	—	5	1·04	—	0·33					
1955 ..	252	330	1,121	1,703	247	328	1,120	1,695	98·02	99·4	99·91	99·53	5	2	1	8	1·98	0·6	0·47					
1954 ..	311	43	379	733	310	42	379	731	99·68	97·7	100·0	99·73	1	1	—	2	0·32	2·3	0·27					
1953 ..	343	18	131	492	343	18	131	492	100·0	100·0	100·0	100·0	—	—	—	—	—	—	—					
1952 ..	137	10	56	203	136	10	56	202	99·28	100·0	100·0	99·51	1	—	—	1	0·72	—	0·49					
1951 ..	25	437	1,351	1,813	24	437	1,349	1,810	96·0	100·0	99·85	99·83	1	—	2	3	4·0	—	0·17					
1950 ..	241	230	542	1,013	239	230	540	1,009	99·17	100·0	99·63	99·61	2	—	2	4	0·83	—	0·39					
1949 ..	151	33	250	434	151	33	250	434	100·0	100·0	100·0	100·0	—	—	—	—	—	—	—					
1948 ..	33	12	190	235	33	12	190	235	100·0	100·0	100·0	100·0	—	—	—	—	—	—	—					
1947 ..	186	349	544	1,079	185	347	544	1,076	99·46	99·4	100·0	99·72	1	2	—	3	0·54	0·6	0·28					
1946 and earlier..	855	455	1,202	2,512	853	452	1,202	2,507	99·77	99·6	100·0	99·80	2	3	—	5	0·23	0·4	0·20					
Totals ..	3,022	2,310	6,406	11,738	3,004	2,302	6,401	11,707	99·41	99·7	99·92	99·74	18	8	5	31	0·59	0·3	0·08					

TABLE B—Pupils found to require Treatment

Age Groups Inspected (By year of birth)	For defective vision (excluding squint)				For any of the other conditions recorded in Part II				Total individual pupils			
	P.	S.D.	C.	Totals	P.	S.D.	C.	Totals	P.	S.D.	C.	Totals
1957 and later ..	—	—	—	—	1	—	2	3	1	—	2	3
1956	13	5	3	21	166	20	21	207	136	24	19	179
1955	12	6	22	40	94	15	52	161	77	21	52	150
1954	26	1	5	32	152	1	20	173	128	2	20	150
1953	25	1	6	32	146	1	5	152	92	2	10	104
1952	16	—	—	16	58	1	1	60	58	1	1	60
1951	4	34	33	71	16	22	41	79	12	54	50	116
1950	37	12	15	64	102	12	18	132	99	24	27	150
1949	14	4	7	25	59	2	15	69	53	5	19	77
1948	2	2	10	14	17	1	9	27	14	2	17	33
1947	26	33	17	76	47	16	14	77	56	47	21	124
1946 and earlier	149	59	56	264	223	16	42	281	325	74	76	475
Totals ..	324	157	174	655	1,074	107	240	1,421	1,051	256	314	1,621

TABLE C—Other Inspections

	P.	S.D.	C.	Totals
Number of Special Inspections	1,031	402	2,126	3,559
Number of Re-Inspections	1,080	192	1,663	2,935
Totals	2,111	594	3,789	6,494

TABLE D—Infestation with Vermin

	P.	S.D.	C.	Totals
Total number of individual examinations of pupils in schools by school nurses or other authorised persons ..	24,493	23,328	20,222	68,043
Total number of individual pupils found to be infested ..	123	36	67	226
Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	—	—	—	—
Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	—	—	—	—

PART II—DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR

TABLE A—Periodic Inspections
T = Treatment O = Observation

Defect Code No.	Defect or Disease				Entrants				Leavers				Others				Totals			
					P.	S.D.	C.	Totals	P.	S.D.	C.	Totals	P.	S.D.	C.	Totals	P.	S.D.	C.	Totals
4	Skin	..	..	T	13	8	6	27	33	9	6	48	48	2	3	53	94	19	15	128
				O	8	—	22	30	1	—	16	17	7	1	12	20	16	1	50	67
5	Eyes—(a)	Vision	..	T	25	19	33	77	175	91	70	336	124	47	63	234	324	157	166	647
				O	27	118	105	250	29	12	154	195	54	18	104	176	110	148	363	621
	(b)	Squint	..	T	15	14	15	44	10	4	4	18	36	10	1	47	61	28	20	109
				O	3	10	54	67	—	1	10	11	5	—	3	8	8	11	67	86
	(c)	Other	..	T	10	—	3	13	7	—	4	11	9	—	1	10	26	—	8	34
				O	1	—	9	10	3	—	16	19	5	—	4	9	9	—	29	38
6	Ears—(a)	Hearing	..	T	11	—	5	16	13	—	2	15	18	1	1	20	42	1	8	51
				O	90	6	34	130	14	—	10	24	42	—	8	50	146	6	52	204
	(b)	Otitis Media	..	T	4	—	2	6	2	2	—	4	2	—	—	2	8	2	2	12
				O	20	—	9	29	—	—	5	5	8	1	1	10	28	1	15	44
	(c)	Other	..	T	2	—	4	6	—	—	2	2	2	—	2	4	4	—	8	12
				O	—	—	25	25	—	—	4	4	2	—	2	4	2	—	31	33
7	Nose and Throat	..	..	T	46	4	27	77	18	—	8	26	65	—	2	67	129	4	37	170
				O	113	11	128	252	23	1	67	91	87	2	10	99	223	14	205	442
8	Speech	..	..	T	10	1	10	21	11	1	5	17	19	1	1	21	40	3	16	59
				O	35	1	29	65	3	—	11	14	36	—	3	39	74	1	43	118
9	Lymphatic Glands	..	..	T	5	—	—	5	—	—	—	—	2	—	—	2	7	—	—	7
				O	32	2	14	48	2	—	6	8	8	—	2	10	42	2	22	66
10	Heart	..	..	T	3	—	—	3	11	—	—	11	3	—	—	3	17	—	—	17
				O	3	4	12	19	8	—	7	15	17	—	10	27	28	4	29	61
11	Lungs	..	..	T	31	1	—	32	10	2	2	14	26	—	—	26	67	3	2	72
				O	24	7	42	73	10	5	16	31	18	2	4	24	52	14	62	128
12	Developmental	(a)	Hernia	T	5	—	1	6	—	1	1	2	3	1	1	5	8	2	3	13
				O	7	—	14	21	1	—	2	3	7	1	2	10	15	1	18	34
	(b)	Other	..	T	6	1	2	9	3	2	3	8	10	3	1	14	19	6	6	31
				O	20	21	16	57	4	1	20	25	17	9	12	38	41	31	48	120
	(c)	Other	..	T	4	1	—	5	17	4	11	32	33	3	11	47	54	8	22	84
				O	5	—	3	8	1	—	31	32	15	—	20	35	21	—	54	75
13	Orthopaedic	(a)	Posture	T	59	5	15	79	71	—	27	98	149	2	21	172	279	7	63	349
				O	90	7	79	176	11	—	93	104	73	1	29	103	174	8	201	383
	(b)	Feet	..	T	18	3	11	32	33	2	13	48	45	2	6	53	96	7	30	133
				O	35	2	40	77	9	—	50	59	28	—	24	52	72	2	114	188
	(c)	Other	..	T	3	—	—	3	2	1	—	3	2	—	—	2	7	1	—	8
				O	—	—	3	3	—	—	1	1	1	—	1	2	1	—	5	6
14	Nervous System	(a)	Epilepsy	T	—	—	1	1	—	—	1	1	3	—	—	3	3	—	2	5
				O	—	—	8	11	—	—	7	7	6	1	—	7	8	2	15	25
	(b)	Other	..	T	1	—	—	1	4	3	1	8	9	8	—	17	14	11	1	26
				O	9	3	8	20	6	—	6	12	22	1	1	24	37	4	15	56
	(b)	Stability	..	T	6	—	—	6	3	—	1	4	22	—	—	22	31	—	1	32
				O	84	1	21	106	7	—	17	24	72	1	2	75	163	2	40	205
16	Abdomen	..	..	T	3	—	—	3	4	—	1	5	6	—	—	6	13	—	1	14
				O	7	—	5	12	2	—	3	5	10	—	—	10	19	—	8	27
17	Other	..	..	T	6	—	1	7	18	—	1	19	30	—	—	30	54	—	2	56
				O	5	—	10	15	4	—	12	16	7	—	5	12	16	—	27	43

TABLE B—*Special Inspections*

Defect Code No.	Defect or Disease	Pupils requiring Treatment				Pupils requiring Observation			
		P.	S.D.	C.	Totals	P.	S.D.	C.	Totals
4	Skin	70	8	4	82	1	—	12	13
5	Eyes (a) Vision ..	35	24	133	192	1	8	343	352
	(b) Squint ..	1	—	6	7	—	—	19	19
	(c) Other ..	10	2	2	14	1	—	19	20
6	Ears (a) Hearing ..	40	—	5	45	2	—	36	38
	(b) Otitis Media ..	3	—	2	5	—	—	7	7
	(c) Other ..	27	—	—	27	—	—	5	5
7	Nose and Throat ..	16	2	9	27	4	—	81	85
8	Speech	4	1	6	11	—	1	26	27
9	Lymphatic Glands ..	—	—	—	—	—	—	2	2
10	Heart	2	—	2	4	—	—	16	16
11	Lungs	8	1	1	10	—	—	19	19
12	Developmental:—								
	(a) Hernia ..	1	—	2	3	—	—	4	4
	(b) Other ..	1	3	4	8	1	1	43	45
13	Orthopaedic:—								
	(a) Posture ..	10	—	18	28	3	—	42	45
	(b) Feet ..	17	—	50	67	5	—	170	175
	(c) Other ..	21	1	11	33	1	—	41	42
14	Nervous System:—								
	(a) Epilepsy ..	1	—	—	1	—	—	3	3
	(b) Other ..	—	—	—	—	—	—	13	13
15	Psychological:—								
	(a) Development ..	142	11	1	154	15	—	20	35
	(b) Stability ..	57	—	—	57	—	—	11	11
16	Abdomen	1	—	1	2	1	—	4	5
17	Other	68	115	1	184	4	—	36	40

PART III—TREATMENT OF PUPILS
TABLE A—*Eye Diseases, Defective Vision and Squint*

	<i>Number of cases known to have been dealt with</i>			
	<i>P.</i>	<i>S.D.</i>	<i>C.</i>	Totals
External and other, excluding errors of refraction and squint ..	28	2	—	30
Errors of refraction (including squint)	1,057	390	1,062	2,509
Totals	1,085	392	1,062	2,539
Number of pupils for whom spectacles were prescribed ..	524	179	433	1,136

TABLE B—*Diseases and Defects of Ear, Nose and Throat*

	<i>Number of cases known to have been dealt with</i>			
	<i>P.</i>	<i>S.D.</i>	<i>C.</i>	Totals
Received operative treatment:—				
(a) for diseases of the ear	23	6	36	65
(b) for adenoids and chronic tonsillitis	213	163	387	763
(c) for other nose and throat conditions	21	18	41	80
Received other forms of treatment	26	—	—	26
Totals	283	187	464	934
Total number of pupils in schools who are known to have been provided with hearing aids:—				
(a) in 1961	6	5	16	27
(b) in previous years	14	12	25	51

TABLE C—*Orthopaedic and Postural Defects*

	<i>Number of cases known to have been treated</i>			
	<i>P.</i>	<i>S.D.</i>	<i>C.</i>	Totals
(a) Pupils treated at clinics or out-patients departments	339	122	266	727
(b) Pupils treated at school for postural defects	586	178	998	1,762
Totals	925	300	1,264	2,489

TABLE D—Diseases of the Skin
(Excluding uncleanness, for which see Table D of Part I)

						Number of cases known to have been treated			
						P.	S.D.	C.	Totals
Ringworm—(a) Scalp	..	..	..	..	..	—	—	—	—
—(b) Body	..	..	..	..	..	6	—	8	14
Scabies .. .. .	..	..	..	..	..	—	8	2	10
Impetigo .. .. .	..	..	..	..	..	4	2	11	17
Other Skin diseases ..	..	..	..	..	..	86	2	—	88
Totals	..	..	..	..	..	96	12	21	129

TABLE E—Child Guidance Treatment

						Number of cases known to have been treated			
						P.	S.D.	C.	Totals
Pupils treated at Child Guidance Clinics	..	..	..	..	..	279	116	359	754

TABLE F—Speech Therapy

						Number of cases known to have been treated			
						P.	S.D.	C.	Totals
Pupils treated by speech therapists	..	..	..	..	..	240	64	373	677

TABLE G—Other Treatment Given

						Number of cases known to have been dealt with			
						P.	S.D.	C.	Totals
(a) Pupils with minor ailments	..	..	..	..	..	605	115	—	720
(b) Pupils who received convalescent treatment under School Health Service arrangements	..	..	..	..	..	—	—	—	—
(c) Pupils who received B.C.G. vaccination	..	..	..	..	..	788	—	2,140	2,928
(d) Other than (a), (b) and (c) above:—									
Pupils who received educational help from the teacher of the deaf	..	..	..	..	..	—	7	45	52
Pupils who received breathing exercises at Asthma Clinic	..				..	49	—	—	49
Pupils who received treatment at Enuresis Clinic (Buzzer alarms)					..	46	—	—	46
Totals	..	..	..	..	..	1,488	122	2,185	3,795

PART IV—DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

						<i>P.</i>	<i>S.D.</i>	<i>C.</i>	Totals
(1)	Number of pupils inspected by the authority's dental officers:—								
	(a)	At periodic inspections	..	..	..	8,073	2,037	21,534	31,644
	(b)	As specials	..	..	..	636	872	468	1,976
	Totals (1)					8,709	2,909	22,002	32,620
(2)	Number found to require treatment					4,193	2,111	13,746	20,050
(3)	Number offered treatment					2,797	2,102	11,097	15,996
(4)	Number actually treated					2,238	1,948	5,149	9,335
(5)	Number of attendances made by pupils for treatment, including those recorded at 11 (<i>h</i>)					9,159	5,560	15,625	30,344
(6)	Half days devoted to:—								
	(a)	Periodic (school) inspection	..	..	..	70	13½	204½	288
	(b)	Treatment	..	..	..	1,456	741½	2,828½	5,026
	Totals (6)					1,526	755	3,033	5,314
(7)	Fillings: (a) Permanent teeth					4,725	2,816	10,598	18,139
	(b) Temporary teeth					1,414	787	3,378	5,579
	Totals (7)					6,139	3,603	13,976	23,718
(8)	Number of teeth filled: (a) Permanent teeth					4,235	2,605	9,613	16,453
	(b) Temporary teeth					1,368	779	3,195	5,342
	Totals (8)					5,603	3,384	12,808	21,795
(9)	Extractions: (a) Permanent teeth					689	901	1,256	2,846
	(b) Temporary teeth					1,486	1,518	4,076	7,080
	Totals (9)					2,175	2,419	5,332	9,926
(10)	Administration of general anaesthetics for extraction					777	1,291	1,604	3,672
(11)	Orthodontics:—								
	(a)	Cases commenced during the year	..	..	..	76	23	40	139
	(b)	Cases brought forward from previous year	..	..	..	11	19	39	69
	(c)	Cases completed during the year	..	..	..	47	4	22	73
	(d)	Cases discontinued during the year	..	..	..	18	—	5	23
	(e)	Pupils treated by means of appliances	..	..	..	74	21	37	132
	(f)	Removable appliances fitted	..	..	..	87	27	42	156
	(g)	Fixed appliances fitted	..	..	..	—	2	—	2
	(h)	Total attendances	..	..	..	1,033	145	332	1,510
(12)	Number of pupils supplied with artificial teeth					36	23	22	81
(13)	Other operations: (a) Permanent teeth					2,456	1,298	1,718	5,472
	(b) Temporary teeth					598	135	855	1,588
	Totals (13)					3,054	1,433	2,573	7,060

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